



**BROWNSVILLE/HAYWOOD COUNTY
CHAMBER OF COMMERCE
APPLICATION FOR EMPLOYMENT**

***Mail application to PO Box 118, Brownsville, TN 38012**

***Must be postmarked by Sept. 30, 2015**

Last Name: _____ First Name: _____ Middle Initial: _____

Address: _____ City, State, Zip _____

Date of Birth: _____

Telephone #: _____

Driver License: State _____ # _____

SSN#: _____

Date of Application: _____

Do you have legal right to work in the United States? Yes _____ No _____

Have you ever been convicted of a felony? Yes _____ No _____

If yes, please explain _____

WORK EXPERIENCE

***List below all present and past employment information and/or substantive volunteer work beginning with the most recent position and ending with your first.**

1. Employer: _____

Address: _____

City/State/Zip: _____

Title of Position: _____

Duties and Responsibilities: _____

From: _____ **To:** _____

Supervisor: _____

Phone Number: _____

Salary History: Starting\$ _____ **Ending \$** _____

Reason for Leaving: _____

2. Employer: _____

Address: _____

City/State/Zip: _____

Title of Position: _____

Duties and Responsibilities: _____

From: _____ **To:** _____

Supervisor: _____

Phone Number: _____

Salary History: Starting\$ _____ **Ending \$** _____

Reason for Leaving: _____

3. Employer: _____

Address: _____

City/State/Zip: _____

Title of Position: _____

Duties and Responsibilities: _____

From: _____ To: _____

Supervisor: _____

Phone Number: _____

Salary History: Starting\$ _____ Ending \$ _____

Reason for Leaving: _____

4. Employer: _____

Address: _____

City/State/Zip: _____

Title of Position: _____

Duties and Responsibilities: _____

From: _____ To: _____

Supervisor: _____

Phone Number: _____

Salary History: Starting\$ _____ Ending \$ _____

Reason for Leaving: _____

*****IMPORTANT*****

I hereby affirm that the information provided on this application (and accompanying resume, if any) is true and complete to the best of my knowledge. I understand that falsified information or significant omissions may disqualify me and my application from further consideration for employment and may be considered justification for dismissal if discovered at a later date. I accept full responsibility for notifying the City of Brownsville, TN of any change in information in my application including, but not limited to, telephone number where I may be contacted.

I authorize persons, schools, my current employer (if applicable), and previous employers and organizations named in this application (and accompanying resume, if any) to provide any information orally and/or in writing that may be requested to arrive at an employment decision and waive any right of privilege, privacy, and/or confidentiality I may have in this information.

This application for employment shall be considered active for a period of time not to exceed 90 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby acknowledge that any employment relationship with the City of Brownsville, TN or related agencies is completely of "at will" nature, which means that the employee may resign at any time and the employer may discharge the employee at any time with or without cause. It is further understood this "at will" employment relationship may be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized official of the City of Brownsville, TN.

I understand, also, that I am required to abide by all rules and regulations given by my employer.

Applicant's Signature

Date

**NOTIFY IN CASE OF
EMERGENCY**

NAME: _____ RELATIONSHIP: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

HOME PHONE: _____ BUSINESS PHONE: _____

CONFIDENTIAL

Background Check Authorization

Print Name: _____

(First)

(Middle)

(Last)

Former Name(s) and Dates Used: _____

Current Address Since: _____

(Mo/Yr) (Street)

(City)

(Zip/State)

Previous Address From: _____

(Mo/Yr) (Street)

(City)

(Zip/State)

Previous Address From: _____

(Mo/Yr) (Street)

(City)

(Zip/State)

Social Security Number: _____ DOB: _____

Telephone Number: _____

Drivers License Number/State: _____

The information contained in this application is correct to the best of my knowledge.

I hereby authorize Brownsville Haywood Co Chamber of Commerce and its designated agents and representatives to conduct a comprehensive review of my background causing a consumer report and/or an investigative consumer report to be generated for employment and/or volunteer purposes. I understand that the scope of the consumer report/ investigative consumer report may include, but is not limited to the following areas: verification of social security number; credit reports, current and previous residences; employment history, education background, character references; drug testing, civil and criminal history records from any criminal justice agency in any or all federal, state, county jurisdictions; driving records, birth records, and any other public records.

I further authorize any individual, company, firm, corporation, or public agency to divulge any and all information, verbal or written, pertaining to me, to Brownsville Haywood Co Chamber of Commerce or its agents. I further authorize the complete release of any records or data pertaining to me which the individual, company, firm, corporation, or public agency may have, to include information or data received from other sources. Brownsville Haywood Co Chamber of Commerce and its designated agents and representatives shall maintain all information received from this authorization in a confidential manner in order to protect the applicants personal information, including, but not limited to, addresses, social security numbers, and dates of birth.

Signature: _____ Date: _____

Notice to California, Minnesota and Oklahoma Residents:

Please check the box below if you wish to receive a copy of a consumer report that is requested.

☐ I wish to receive a copy of any Background Check Report on me that is requested.